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Janet Napolitano

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Board Chair/Physician Member

Sharon B. Megdal, Ph.D.
Vice Chair/Public Member

Robert P. Goldfarb, M.D.
Board Secretary/Physician Member

Patrick N. Connell, M.D.
Physician Member

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Physician Member

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Physician Member

Becky Jordan
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Physician Member

William R. Martin, III, M.D.
Physician Member

Dona Pardo, Ph.D., RN
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Gary Oglesby
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The Arizona M.D. Update

A Bi-Monthly Update of the Arizona Medical Digest

A Letter from the Executive Director

Barry A. Cassidy, Ph.D., PA-C



The Arizona Medical Board is no stranger to change. Over the past five years, the Board has adopted change as a part of an evolving web of operational and systematic improvements. The composition and leadership of the Board itself is also subject to change. New philosophies are embraced and new leaders emerge on a regular basis.

As you will see from the article beginning at the bottom of this page, the Board elected three new officers to fill its leadership positions. I congratulate Edward J. Schwager, M.D., Sharon B. Megdal, Ph.D., and Robert P. Goldfarb, M.D. as the newly elected Chairman, Vice Chair and Secretary, respectively. I look forward to working with these three dynamic individuals as we take the Board forward.

In retrospect, I also want to thank the Board's past Chairman, Patrick Connell, M.D. and past Secretary, Becky Jordan for the time and dedication they put forth while serv-

ing honorably as Board leadership over the last two years. The support you and your fellow Board members expressed during my first year as Executive Director is truly appreciated. Without your unwavering vision and focus, my transition into the agency would not have been as successful.

As I look forward to the future, I anticipate even greater movement toward protecting the public and increased physician due process. Over the last few months, a complete evaluation of the agency's investigative process has been conducted and steadily, improvements are being made.

Technology is a pervading force behind many of the Board's past improvements and those improvements yet to come. In July, the Board was able to launch its newly redesigned website. The design, content, and website structure were all completed in-house, using the Board's existing technology platform.

As a result, the site launched almost overnight and at no additional cost to the agency.

Technology has also made internal operations more efficient as a redesign of the Board's database has led to greater and more reliable statistical reporting. The information gathered from the database will serve as a future predictor of statistical trends and as a measurement tool for process improvement.

In closing, I encourage you to take an active role in the development of a proactive and nationally-leading medical board. E-mail the Board at questions@azmdboard.org and share your comments.

AMB Officers Elected

Three Tucson residents, Edward J. Schwager, M.D., Sharon B. Megdal, Ph.D., and Robert P. Goldfarb, M.D., were elected to the Arizona Medical Board's respective Chairman, Vice Chair, and Secretary positions. Dr. Schwager, who previously served as the Board's Vice-Chairman, replaces outgoing Chairman Patrick N. Connell, M.D. of Phoenix. Dr. Megdal filled the Vice Chair

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BOARD MEETING DATES

October 8-9, 2003

December 10-11, 2003

February 11-12, 2004

April 14-15, 2004

Medical Assistants — What You Need to Know

A medical assistant (MA) is an unlicensed person who assists in the medical practice under the supervision of a physician, physician assistant or nurse practitioner and performs delegated procedures commensurate with the MA's education and training. An MA does not diagnose, interpret, design or modify established treatment programs or perform any functions that would violate any statute applicable to the practice of medicine.

The Arizona Medical Board does not license, discipline or regulate medical assistants in Arizona. In fact, they operate independently and are only held to the training requirements set forth in rules. These rules, (R4-16-301 through R4-16-303), found on the Arizona Medical Board's website, www.azmdboard.org, also provide a general overview of authorized procedures for a medical assistant. While not a comprehensive listing, when reviewed in conjunction with A.R.S. §32-1456, physicians may decide which procedures they are comfortable delegating to their medical assistant. The most important thing for a physician to remember when delegating tasks to a medical assistant is that the physician is ultimately responsible for the patient's care.

The question and answer section below provides some guidance to commonly asked questions. While this list is not comprehensive, it will provide you with a good start. For more information on medical assistant rules and statutes, visit the Board's website at www.azmdboard.org or consult your *Medical Directory and Resource Handbook*.

Q: Do I need to provide the Board with documentation of my medical assistant's training?

A: *No. The Board does not regulate medical assistants and does not require documentation of training. However, if a complaint is filed against you and involves care rendered by your medical assistant, you may be asked to prove the medical assistant was appropriately trained.*

Q: Do the medical assistant training requirements pertain to all medical assistants?

A: *No. Medical assistants, prior to February 2000, directly supervised by the same physician, group of physicians, or physician assistant for at least 2000 hours are not required to fulfill the training requirements. Other exemptions apply – see R4-16-302 for more information.*

Q: What does “direct supervision” of a medical assistant mean?

A: *Direct supervision, as defined in statute, means that a physician, physician assistant or nurse practitioner is within the same room or office suite as the medical assistant in order to be available for consultation regarding those tasks the medical assistant performs. (A.R.S. §32-1401(8)).*

Q: Do medical assistants need to be certified?

A: *No. Medical assistants are not licensed in Arizona and certification is not required. (To become certified, a medical assistant must successfully pass a certification examination.)*

For more information on medical assistants, the Commission on Accreditation of Allied Health Education Programs (CAAHEP) provides an approved medical assistant training program on-line. Visit, www.caahep.org, click on Standards and Guidelines, then on Medical Assistants. The document includes a curriculum for medical assistant training.

Medical Assistants Recognition Week

October 20-24, 2003

Working side by side with physicians and other skilled practitioners, medical assistants make a difference in the lives of the patients they serve. Medical Assistants Recognition Week is the perfect time to show your appreciation. For more information on Medical Assistants Recognition Week, contact the American Association of Medical Assistants at 1-800-ACT-AAMA or visit their website at www.aama-ntl.org.



AMB Officers Elected

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vacancy left by Dr. Schwager, and Dr. Goldfarb replaces outgoing Secretary, Becky Jordan, of Phoenix. The decision was reached August 14, 2003, as part of the Board's annual vote to establish leadership positions.

Dr. Schwager is a family physician in Tucson. He was the national chairman of the Association of American Medical Colleges' Organization of Student Representatives and went on to serve as a member of the Executive Council of the Association of American Medical Colleges, and president of the Arizona Academy of Family Physicians. He is listed in Best Doctors in America, Pacific Region. He is certified by the American Board of Family Practice and has received an additional Certificate of Added Qualifications in Geriatrics. Dr. Schwager is also an Associate Clinical Professor in the Department of Family and Community Medicine at the University of Arizona.

Dr. Schwager completed his medical degree and family practice residency at the University of Arizona.

Dr. Megdal serves as Associate Director of the Water Resources Research Center, as well as Professor and Specialist of the Department of Agricultural and Resource Economics. She has been a member of the Arizona Corporation Commission and served as the Chair of the Arizona Joint Select Committee on State Revenues and Expenditures. In 1997 Dr. Megdal completed a six-year term on the Arizona State Transportation Board, serving as the board's Chair during the last year of her term. Dr. Megdal has also been a member of the Board of Trustees of TMC Healthcare and the Board of the Arizona Hospital and Healthcare Association. She previously served as Co-Chair of Governor Hull's Transportation Vision 21 Task Force and was a member of the Governor's Water Management Commission. She currently serves on the Arizona Water Quality Appeals Board.

Dr. Megdal received her doctor of philosophy degree in economics from Princeton University, with a specialization in public sector economics and econometrics. In October 2000, *The Business Journal* named her one of the "Valley's Most Influential" in the area of Transportation.

Robert P. Goldfarb, M.D. graduated from Tulane University, School of Medicine and works in a private Tucson neurosurgery practice. Dr. Goldfarb is also a neurosurgical consultant to the University of Arizona Athletic Depart-

ment and to the Davis-Monthan Air Force Base Hospital. Dr. Goldfarb completed his Internship at Michael Reese Hospital and Medical Center in Chicago and his Residency in Neurological Surgery at the University of Illinois Hospitals and Presbyterian-St. Lukes Hospital in Chicago. He is certified by both the American Board of Neurological Surgery and the American College of Surgeons.

Dr. Goldfarb is an active member on the El Dorado Hospital Board of Trustees and is a member of several professional societies including the American Association of Neurological Surgeons (Harvey Cushing Society), Congress of Neurological Surgeons, American Medical Association, Arizona Medical Association, and the Pima County Medical Society.

Question of the Month

Q. *If a patient wishes to transfer to another physician for medical care, can I provide the patient with the entire medical record, or do I need to keep a copy?*

A. A.R.S. §12-2297 states that a health care provider shall retain the original or copies of a patient's medical records for at least seven years after the last date the patient received medical care if the patient is an adult. If the patient is a child, records must be retained for at least three years after the child's eighteenth birthday or for at least seven years after the last date the child received medical services.

A.R.S. §12-2293 states that upon written request, a health care provider in possession of the record shall provide the medical records to the patient or to the person designated in writing by the patient.

For the complete text of these statutes, visit the Arizona State Legislature website at www.azleg.state.az.us or consult your Medical Directory and Resource Handbook.

JCAHO Releases Universal Protocol For Surgery

The Board of Commissioners of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) approved a 'Universal Protocol' for preventing wrong site, wrong procedure and wrong person surgery. Compliance with the Universal Protocol by all accredited organizations that provide surgical services will be required beginning on July 1, 2004.

The Universal Protocol draws upon, and expands and integrates, a series of existing requirements under the 2003 and 2004 National Patient Safety Goals. It will be applicable to all operative and other invasive procedures. The principal components of the Universal Protocol include: (1) the pre-operative verification process; (2) marking of the operative site; (3) taking a 'time out' immediately before starting the procedure; and (4) adaptation of the requirements to non-operating room settings, including bedside procedures.

The Universal Protocol is the consensus product of a national Summit on Wrong Site Surgery convened last spring by the Joint Commission, the American Medical Association, the American Hospital Association, the American College of Physicians, the American College of Surgeons, the American Dental Association and the American Academy of Orthopaedic Surgeons. Summit participants included leaders from other medical and surgical specialty organizations, nursing organizations and provider associations, among others. The Summit participants concluded that wrong site, wrong procedure and wrong person surgery can be prevented and that a Universal Protocol is needed to help accomplish this goal.

"This Universal Protocol asks health care organizations to set a goal of zero-tolerance for surgeries on the wrong site or on the wrong person, or the performance of the wrong surgical procedure," says Dennis S. O'Leary, M.D., president, JCAHO. "These are occurrences which simply should never happen."

A three-week public comment period that concluded in July generated more than 3,000 responses from surgeons, nurses and other health care professionals, which were overwhelmingly in support of the Universal Protocol. The comments also provided the basis for a number of refinements to the Protocol.

Despite widespread acknowledgement that surgeries on the wrong site or on the wrong person, or the wrong sur-

gical procedure should never happen, the Joint Commission continues to receive five to eight new reports of wrong site surgery every month from organizations that provide surgical services. These reports are almost all shared with the Joint Commission on a voluntary basis.

The Joint Commission plans to seek formal endorsement of the Universal Protocol from all of the organizations that participated in the Wrong Site Surgery Summit, as well as other professional leadership organizations having interest in this issue.

It's Live! Arizona Medical Board Launches Redesigned Website

As of July 23, 2003, millions of people can access one of the top rated medical board sites in the nation and get a glimpse at something better. The redesigned site, www.azmdboard.org, was launched this afternoon. "The Board's website has always ranked high for its plethora of information," said Executive Director Barry A. Cassidy, Ph.D., P.A.-C. "The redesigned site just takes that information and organizes it so that intuitively, users will know where to find it."

In 1998, the Arizona Medical Board launched its primary website. Containing scant information initially, the website grew over the years to accommodate the public's needs. Physician profiles, one of the heaviest hit website pages, provide almost all the public information the Board has on an individual physician, including the full text of Board orders. The Arizona Medical Board has seen the numbers of physician profile hits climb from 1,624,518 in fiscal year 2002 to over three million this last fiscal year.

The newly designed site also offers individualized areas of interest to its primary users. For instance, the Consumer Center contains information on filing a complaint, pamphlets about choosing a doctor, and a Physicians of Interest page that highlights Arizona's physicians who historically, have made a difference in health care today. A Physician Center also provides information about licensure, the Board's adjudication process, and their responsibilities for notifying the Board of a change of address.

The Arizona Medical Board's website received approximately nine million hits last year from consumers, physicians, and various other interested parties. When considering the popularity of the site, growth in past website hits, and the new, easy-to-use format, Board officials predict an increase of almost four million hits within the next year.
